

Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2008-09

**Child Mental Health
Assessment Only (CMAO)**

Client Eligibility Criteria	<p>Child, starting on the third birthday until the 18th birthday, who:</p> <ul style="list-style-type: none"> • are seeking or needing services for a Mental Health problem or symptom, AND • have completed a current LME Screening/Triage/Referral (STR) process, AND • have received a current LME STR triage determination of "Urgent" or "Routine", AND • have been referred by the LME STR to the provider for assessment, AND • have been determined by the provider <u>not to be eligible for any other MH, DD, or SA Target Population, AND</u> • have been determined by the provider <u>not to be eligible for Medicaid services.</u> <p>The purpose of the Assessment Only target population is to provide a mechanism to reimburse a provider for a single service or assessment event that has been provided to a consumer, but for whom the provider determines that the consumer does not meet eligibility requirements for any other Target Population or for Medicaid services. Pending record requirements in APSM 45-2 apply.</p>
ICD-9 Diagnosis Ranges	<p>Any valid ICD-9</p> <p align="center">~~~~~</p> <p>For the most current list of specific diagnoses, refer to <u><i>IPRS Diagnosis / Target Population Crosswalk</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Concurrency Issues	<p>An individual cannot be enrolled in CMAO and any other MH, DD, or SA Target Population category at the same time.</p> <p align="center">~~~~~</p> <p>For full details, refer to <u><i>IPRS Eligibility Concurrency</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Service Array	<p align="center">Refer to <u><i>IPRS Service Array</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Provider Restrictions	<p>Billing Provider -- Area Program or LME</p> <p>Attending Provider – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/SA Provider</p>
Funding Source(s)	<p>Child MH UCR State 536945 1290 220 00</p> <p align="center">~~~~~</p> <p>For full details, refer to <u><i>IPRS Budget Criteria</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Utilization Management	<p>Up to 1 periodic service event within a current episode of care, and up to 2 periodic service events within the fiscal year, after which prior approval is required or current eligibility enrollment in another Target Population category.</p>

**Child Mental Health
Crisis Services (CMCS)**

Client Eligibility Criteria	<p>Children, starting on the third birthday until the 18th birthday, who:</p> <p>are seeking or needing services for a current Mental Health problem or symptom,</p> <p>AND</p> <p><u>who is not eligible for Medicaid,</u></p> <p>AND</p> <p>who have completed a current Screening/Triage/Referral Interview and have received an "Emergent" triage determination, as defined below*, <u>or</u> are currently enrolled in an eligible Child Mental Health Target Population and are in need of crisis or emergency services beyond the capacity of the designated First Responder provider,</p> <p><i>Note: An individual who is eligible for Medicaid is <u>not</u> eligible for the Crisis Services target population, nor is an individual who is eligible for both Medicaid and IPRS services. The Crisis Services target population is limited to only those individuals who either:</i></p> <p><i>a) have <u>no IPRS target population eligibility</u>, or</i></p> <p><i>b) have <u>only IPRS target population eligibility</u>, but not Medicaid eligibility.</i></p> <p>The purpose of the Crisis Services Target Population is to provide a mechanism to reimburse a provider for crisis or emergency services that have been provided to a non-Medicaid Child Mental Health consumer. The consumer may or may not meet eligibility requirements for any other IPRS Target Population, but may <u>not</u> be eligible for Medicaid.</p> <p>Eligibility for the Crisis Services target population requires LME admission of consumer into the CDW through completion of the Identifying Information (Record 10 or 30), Demographics (Record 11 or 31), and Substance Abuse (Drug of Choice) Details (Record 17 or 37).</p> <p>The LME may establish the initial eligibility period in the Crisis Services (CMCS) population group for up to fourteen (14) days. After the initial eligibility period, the consumer must be reassessed and determined to continue to be in need of crisis and emergency services to be considered for another fourteen (14) day eligibility period.</p> <p><i>* STR Definition of "Emergent": An individual's need shall be categorized as "Emergent" when the individual presents a moderate or severe risk related to safety or supervision, or is at moderate or severe risk of substance abuse withdrawal symptoms, or presents a mild, moderate, or severe risk of harm to self or others, or has severe incapacitation in one or more area(s) of physical, cognitive, or behavioral functioning related to mental health, developmental disabilities or substance abuse problems.</i></p>
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Integrated Payment & Reporting System (IPRS) Target Population Details – FY 2008-09

**Child Mental Health
Crisis Only (CMCS)
(Continued)**

ICD-9 Diagnosis Ranges	Any Valid ICD-9 For the most current list of specific diagnoses, refer to <u><i>IPRS Diagnosis / Target Population Crosswalk</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)
Concurrency Issues	An individual cannot be enrolled in CMCS and any other MH, DD, or SA Target Population category at the same time. ~~~~~ For full details, refer to <u><i>IPRS Eligibility Concurrency</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)
Service Array	Refer to <u><i>IPRS Service Array</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)
Provider Restrictions	Billing Provider – LME Attending Provider- Multi-Service Provider or Multi-Service w/SA Provider or Enrolled MH Provider
Funding Source(s)	Child MH Crisis 536996003 1590 220 00 ~~~~~ For full details, refer to <u><i>IPRS Budget Criteria</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)
Utilization Management	Each Local Management Entity is responsible for the development and implementation of crisis and emergency services delivery and authorization guidelines to ensure the prompt and efficient implementation of services to eligible “Crisis Services (CS)” consumers. This includes LME approved procedures for the authorization of 24 hour admissions to inpatient hospital, facility based crisis, and 24 hour detoxification programs. The Division recommends that the LME review and authorize Mobile Crisis services after the delivery of the initial 16 units (4 hours) of this service. During regular hours of operation, the Division recommends immediate notification of the LME by the crisis or emergency services provider for all 24 hour emergency admissions. Written notification regarding such emergency admissions is recommended to be provided to the LME within 24 hours in all circumstances.

**Child Mental Health
Early Childhood Disorder - (CMECD)**

<p>Client Eligibility Criteria</p>	<p>Child, starting on the third birthday until the 6th birthday, who demonstrates significantly atypical behavioral, socio-emotional, motor or sensory development such as:</p> <ol style="list-style-type: none"> 1. Diagnosed hyperactivity, attention deficit disorders, autism spectrum disorders, severe attachment disorders, other pervasive developmental disorders, or other behavioral disorders. 2. Have indicators of emotional and behavioral disorders such as: <ol style="list-style-type: none"> a. delay or abnormality in achieving emotional milestones, such as attachment, parent-child interaction, pleasurable interest in adults and peers, ability to communicate emotional needs, or ability to tolerate frustration; b. persistent failure to initiate or respond to most social interactions; c. fearfulness or other distress that does not respond to comforting by caregivers; d. indiscriminate sociability, for example, excessive familiarity with relative strangers, or e. self-injurious or other aggressive behavior. 3. Have substantiated physical abuse, sexual abuse, or other environmental situations that raise significant concern regarding the child's emotional well being. <p>OR</p> <p>Have documented presence of one or more of the following indicators associated with patterns of development, which have a high probability of meeting the criteria for developmental delay or atypical development as the child matures:</p> <ol style="list-style-type: none"> a. Parental Substance Abuse: Birth mother during pregnancy or primary care giving parent has been a habitual abuser of alcohol and/or drugs. b. Parental Mental Retardation: Either parent has been diagnosed with mental retardation or developmental disability c. Parental Mental Illness: Either parent has a diagnosed illness such as severe depression, bipolar illness, schizophrenia, or borderline psychotic conditions. <p>OPTIONAL for FY04-05: The child</p> <p>Has a documented risk assessment score on the ASQ-SE as follows</p> <ul style="list-style-type: none"> 3 years of age ROC cutoff score of 59 4 years of age ROC cutoff score of 70 5 years of age ROC cutoff score of 70 <p>Eligibility Determination for this population group should be completed annually in conjunction with the Person Centered Plan process.</p>
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**Child Mental Health
Early Childhood Disorder - (CMECD)
(continued)**

ICD-9 Diagnosis Ranges	<div> <div>291-298931281-3149</div> <div>299-29993153</div> <div>300-301931531</div> <div>30273158</div> <div>303-31243159</div> </div> <div>~~~~~</div> <div>For the most current list of specific diagnoses, refer to <i>IPRS Diagnosis / Target Population Crosswalk</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</div>
Concurrency Issues	<div>An individual cannot be enrolled in CMECD and any other MH, DD, or SA Target Population category at the same time.</div> <div>~~~~~</div> <div>For full details, refer to <i>IPRS Eligibility Concurrency</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</div>
Service Array	<div>Refer to <i>IPRS Service Array</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</div>
Provider Restrictions	<div>Billing Provider – Area Program or LME</div> <div>Attending Provider – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/DD Provider</div> <div>All providers staff shall have child mental health and early childhood development specific skills, education and experience.</div>
Funding Source(s)	<div> <div>Child MH State Crisis536996003 1590 220 00(procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820)</div> <div>Child MH SSBG536945 1291 250 Q7</div> <div>Child MH MHBG536945 1291 250 6W(procedure code NOT YP820)</div> <div>Child MH State UCR536945 1290 220 00</div> <div>Child MH UCR CTSP536930 1290 220 39</div> </div> <div>~~~~~</div> <div>For full details, refer to <i>IPRS Budget Criteria</i> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</div>
Utilization Management	

**Child Mental Health
Seriously Emotionally Disturbed-(CMSED)**

Client Eligibility Criteria	<p>Child, starting on the third birthday until the 18th birthday, with atypical development (up to age 5) or Serious Emotional Disturbance (SED) as evidenced by the presence of a diagnosable mental, behavioral, or emotional disturbance that meets diagnostic criteria specified in ICD-9;</p> <p>AND</p> <p>Functional impairment that seriously interferes with or limits his/her role or functioning in family, school, or community activities</p> <p>This population should include clients who are assessed as deaf or as needing specialized mental health services due to social, linguistic or cultural needs associated with individual or familial deafness or hearing loss.</p> <p>The revised target population of Child Mental Health Seriously Emotionally Disturbed (CMSED) consolidates the following former target populations for consumer eligibility to services within IPRS: Child Mental Health Seriously Emotionally Disturbed with Out-of-Home Placement (CMSED), Child Mental Health Seriously Emotionally Disturbed (CMMED), Child Mental Health Deaf or Hard of Hearing (CMDEF), and Child Mental Health Homeless (PATH) - (CMPAT).</p> <p>It should also include those clients who are homeless or at imminent risk of homelessness. These are defined as:</p> <p>(1) Lacks a fixed, regular, adequate night-time residence;</p> <p>OR</p> <p>(2) Has a primary night-time residence that is:</p> <p>(a) temporary shelter;</p> <p>or</p> <p>(b) temporary residence for individuals who would otherwise be institutionalized;</p> <p>or</p> <p>(c) place not designed/used as a regular sleeping accommodations for human beings;</p> <p>And</p> <p>(1) Due to be evicted or discharged from a stay of 30 days or less from a treatment facility</p> <p>AND</p> <p>(2) Lacking resources to obtain and/or maintain housing</p> <p>Eligibility Determination for this population group should be completed annually in conjunction with the Person Centered Plan process.</p> <p>~~~~~</p> <p>NOTES:</p> <p>This target population was designed to cross walk with Levels C and D in the Child Levels of Care Document (March 2002). For additional information please refer to this document.</p> <p>Also, for additional clarification regarding specific terminology used in eligibility determination, please refer to the Child Mental Health IPRS Eligibility Clarification document.</p>
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**Child Mental Health
Seriously Emotionally Disturbed (CMSED)
(continued)**

ICD-9 Diagnosis Ranges	<div> <div>293-29799</div> <div>3028-3029</div> <div>9958-99589</div> <div>V7102</div> </div> <div> <div>2988-2989</div> <div>306-30999</div> <div>V158-V1589</div> </div> <div> <div>300-30099</div> <div>3101</div> <div>V61-V619</div> </div> <div> <div>30113</div> <div>311-31499</div> <div>V623-V629</div> </div> <div> <div>302-3026</div> <div>9955-99559</div> <div>V652</div> </div> <div>~~~~~</div> <p>For the most current list of specific diagnoses, refer to <u><i>IPRS Diagnosis / Target Population Crosswalk</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Concurrency Issues	<p>An individual cannot be enrolled in CMSED and any other MH, DD, or SA Target Population category at the same time.</p> <div>~~~~~</div> <p>For full details, refer to <u><i>IPRS Eligibility Concurrency</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Service Array	<p>Refer to <u><i>IPRS Service Array</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Provider Restrictions	<p>Billing Provider - Area Program or LME</p> <p>Attending Provider – Multi-Service Provider or Enrolled MH Provider or Multi-Service w/SA Provider</p>
Funding Source(s)	<div> <div>Child MH State Crisis</div> <div>536996003 1590 220 00</div> <div>(procedure code H0010, H2011, H2036, S9484, YP485, YP790, YP820)</div> </div> <div> <div>Child MH SSBG</div> <div>536945 1291 250 Q7</div> </div> <div> <div>Child MH MHBG</div> <div>536945 1291 250 6W</div> <div>(procedure code NOT YP820)</div> </div> <div> <div>Child MH State UCR</div> <div>536945 1290 220 00</div> </div> <div> <div>Child MH ARC UCR – SSBG</div> <div>536930 1291 250 Q7</div> </div> <div> <div>Child MH ARC UCR – MHBG</div> <div>536930 1291 250 6W</div> </div> <div> <div>Child MH UCR CTSP</div> <div>536930 1290 220 39</div> </div> <p>The small reserve for interpreter services will continue to be handled on an invoice basis outside the IPRS system at this time</p> <div>~~~~~</div> <p>For full details, refer to <u><i>IPRS Budget Criteria</i></u> on the IPRS website. (http://www.dhhs.state.nc.us/mhddsas/iprsmenu/index.htm)</p>
Utilization Management	<p>For Utilization Management information, refer to the <u><i>Child Levels of Care Criteria</i></u> document dated March 2002.</p>